



00023794201508709930030032

KAREN ELLISON, RECORDER

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A NAME & PHONE OF CONTACT AT FILER (optional) Phone (800) 331-3282 Fax (818) 662-4141	
B E-MAIL CONTACT AT FILER (optional) CLS-CTLS_Glendale_Customer_Service@wolterskluwer.com	
C SEND ACKNOWLEDGMENT TO (Name and Address) 23974 - SOLARCITY	
CT Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071	50674145 NVNV FIXTURE
File with Douglas, NV	

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1 DEBTOR'S NAME Provide only one Debtor name (1a or 1b) (use exact, full name, do not omit, modify, or abbreviate any part of the Debtor's name), if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a ORGANIZATION'S NAME					
OR	1b INDIVIDUAL'S SURNAME HELLEN		FIRST PERSONAL NAME ROBERT	ADDITIONAL NAME(S)/INITIAL(S) M	SUFFIX
1c MAILING ADDRESS 1038 HAYSTACK DR		CITY CARSON CITY	STATE NV	POSTAL CODE 89705	COUNTRY USA

2 DEBTOR'S NAME Provide only one Debtor name (2a or 2b) (use exact, full name, do not omit, modify, or abbreviate any part of the Debtor's name), if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a ORGANIZATION'S NAME					
OR	2b INDIVIDUAL'S SURNAME HELLEN		FIRST PERSONAL NAME BETTY	ADDITIONAL NAME(S)/INITIAL(S) M	SUFFIX
2c MAILING ADDRESS 1038 HAYSTACK DR		CITY CARSON CITY	STATE NV	POSTAL CODE 89705	COUNTRY USA

3 SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY) Provide only one Secured Party name (3a or 3b)

3a ORGANIZATION'S NAME SOLARCITY CORPORATION					
OR	3b INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c MAILING ADDRESS 3055 CLEARVIEW WAY		CITY SAN MATEO	STATE CA	POSTAL CODE 94402	COUNTRY USA

4 COLLATERAL This financing statement covers the following collateral:

All energy generation systems and associated components at any time provided by SolarCity Corporation to Debtor. The Secured Party is not taking a security interest in the real property (except solely to the extent the foregoing is a fixture). The Secured Party's only security interest is in the specific collateral described in this section.

5 Check only if applicable and check only one box. Collateral is held in a Trust (see UCC1Ad, item 17 and Instructions) being administered by a Decedent's Personal Representative

6a Check only if applicable and check only one box
 Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility

6b Check only if applicable and check only one box
 Agricultural Lien Non-UCC Filing

7 ALTERNATIVE DESIGNATION (if applicable) Lessee/Lessor Consignee/Consignor Seller/Buyer Bailee/Bailor Licensee/Licenser

8 OPTIONAL FILER REFERENCE DATA
 50674145 JB-897103-00 Hellen, Betty 0792 Reno

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS

9 NAME OF FIRST DEBTOR Same as line 1a or 1b on Financing Statement, if line 1b was left blank because Individual Debtor name did not fit, check here

9a ORGANIZATION'S NAME

OR 9b INDIVIDUAL'S SURNAME

HELLEN

FIRST PERSONAL NAME

ROBERT

ADDITIONAL NAME(S)/INITIAL(S)

M

SUFFIX

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

10 DEBTOR'S NAME Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name, do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c

10a ORGANIZATION'S NAME

HELEN FAMILY TRUST

OR 10b INDIVIDUAL'S SURNAME

INDIVIDUAL'S FIRST PERSONAL NAME

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

10c MAILING ADDRESS

1038 HAYSTACK DR

CITY

CARSON CITY

STATE

NV

POSTAL CODE

89705

COUNTRY

USA

11 ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME Provide only one name (11a or 11b)

11a ORGANIZATION'S NAME

OR 11b INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

11c MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

12 ADDITIONAL SPACE FOR ITEM 4 (Collateral)

13 This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)

14 This FINANCING STATEMENT

covers timber to be cut covers as-extracted collateral is filed as a fixture filing

15 Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest)

HELEN FAMILY TRUST
1038 HAYSTACK DR
CARSON CITY, NV 89705

16 Description of real estate

A PARCEL OF LAND LOCATED IN THE STATE OF NV, COUNTY OF DOUGLAS, WITH A SITUS ADDRESS OF 1038 HAYSTACK DR, CARSON CITY NV 89705-8071 C043 CURRENTLY OWNED BY HELLEN ROBERT M (TE) & HELLEN BETTY M (TE) HAVING A TAX ASSESSOR NUMBER OF 1420-08-212-029 AND DESCRIBED IN DOCUMENT [See Exhibit for Real Estate]

17 MISCELLANEOUS 50674145-NV-5 23974 - SOLARCITY

SOLARCITY CORPORATION

File with Douglas, NV

JB-897103-00 Hellen, Betty 0792 Reno

Debtor: HELLEN, ROBERT, M

Exhibit for Real Estate

16. Description of real estate: Continued

NUMBER 1012-3148 DATED 10/11/2012 AND RECORDED 10/11/2012 .

